

1997

Wisconsin Composite Estimated Tax Voucher

Form

CN-ES

For Nonresident Partners or Shareholders
Using Form 1CNP or 1CNS for Calendar Year 1997

Federal Employer Identification Number		
Name of Partnership or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #1

Due Date: April 15, 1997

AMOUNT OF PAYMENT

\$

Please do not staple your payment to this voucher.

Make your check payable to and mail to:Wisconsin Department of Revenue
P.O. Box 8912
Madison, WI 53708-8912

DC-046

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Federal Employer Identification Number		
Name of Partnership or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #2

Due Date: June 16, 1997

AMOUNT OF PAYMENT

\$

Please do not staple your payment to this voucher.

Make your check payable to and mail to:Wisconsin Department of Revenue
P.O. Box 8912
Madison, WI 53708-8912

DC-046

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Street Address		
City	State	Zip Code

VOUCHER #3

Due Date: September 15, 1997

AMOUNT OF PAYMENT

\$

Please do not staple your payment to this voucher.

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Federal Employer Identification Number		
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Street Address		
City	State	Zip Code

VOUCHER #4

Due Date: January 16, 1998

AMOUNT OF PAYMENT

\$

Please do not staple your payment to this voucher.

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Street Address		
City	State	Zip Code

VOUCHER #5 — EXTENSION PAYMENT

Due Date: April 15, 1998

AMOUNT OF PAYMENT

\$

Please do not staple your payment to this voucher.

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P.O. Box 8912
Madison, WI 53708-8912

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